FLIP	Rev
June	2023

ALABAMA FOREIGN LANGUAGE COURT INTERPRETER PROGRAM AUTHORIZATION TO CONDUCT A CRIMINAL BACKGROUND CHECK AND INVESTIGATION

As an applicant to participate in the Alabama Foreign Language Court Interpreter Program, I hereby authorize the Alabama Administrative Office of Courts (AOC) to conduct a criminal background check and investigation. By completing, signing and returning this form to the AOC, I understand and agree that the AOC may conduct a criminal background check and seek any further information regarding my character, qualifications and/or work performance.

Please type or print the following information <u>using ONLY a BLACK GEL INK PEN.</u> Do Not Use a Ball Point Pen.

Full Name:				
Cacial Cacurity Number				
Social Security Number:				
Driver License Number:				
Date of Birth:	Sex:	Race:		
Current Address:				
City:	State:	Zip Code:		
Daytime Phone:				
Cell Phone:				
Email Address:				
SIGNATURE		DATE		
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Note: You must submit a readable copy of your driver license and signed /readable copy of your social security card with the authorization form. If your social security card has restrictions listed on the card you must also submit the corresponding documents relating to those specific restrictions.

Please mail your completed authorization form to:

Foreign Language Interpreter Program ATTN: Joy Evans 300 Dexter Avenue Montgomery, AL 36104